

M 5 L 199

# REPLACEMENT SYSTEM VARIANCE REQUEST

## THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application for the proposed replacement system which does not comply with the Rules. The LPI shall review the Replacement System Variance Request and Application and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System from the rules.
2. A system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

## GENERAL INFORMATION

Town of Augusta

Permit No. 3078 E Date Permit Issued 9/28/94  
MONTH/DAY/YEAR

Property Owner's Name: Maurice Duband Tel. No. 622-7838

System's Location: Burns Road  
STREET

Augusta TOWN Maine 04880 ZIP

Property Owner's Address: \_\_\_\_\_  
(if different from above) STREET

\_\_\_\_\_ TOWN \_\_\_\_\_ STATE ME 622-5770 ZIP

## SPECIFIC INSTRUCTIONS TO THE:

### LPI:

If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, they you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

### SITE EVALUATOR:

If after completing the Application, you find that a variance for the proposed replacement system is needed, then complete the Replacement Variance Request with your signature on reverse side of form.

### PROPERTY OWNER:

It has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

The OWNER shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached Application, I understand that the proposed system is not in total compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

Maurice Duband  
PROPERTY OWNER'S SIGNATURE

DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
SOILS Soil Profile Soil Condition from HHE-200	Ground Water Table	to 6"		8" inches	
	Restrictive Layer	to 6"		inches	
	Bedrock	to 10"		inches	
SETBACK DISTANCES (IN FEET)	FROM:	TREATMENT TANK	DISPOSAL AREA	TREATMENT TANK	DISPOSAL AREA
Potable Water Supplies	1. Well: > 2000 gal/day	100'	300'		
	2. Well: < 2000 gal/day				
	a. Neighbor's	50' <sup>b</sup>	60' <sup>b</sup>		
	b. Property Owner's	25'	50'	75'	75'
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Perennial	50'	60'		
	2. Intermittent	15'	20'		
	3. Manmade drainage ditch	10'	15'		
Downhill Slope	Greater than 3:1 (33%)	5' <sup>c</sup>	10' <sup>c</sup>		
Buildings	1. With Basement	5'	10'		
	2. Without Basement	5'	10'		
Property Line		4'	5'		

**OTHER**

1. Fill extension Grade—to 3:1 *on Down Hill side with 5' Berm*

2.

3.

**Footnotes:**

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope.

*[Signature]*

SITE EVALUATOR'S SIGNATURE

*9-25-94*

DATE

**LPI STATEMENT**

I, \_\_\_\_\_, LPI for the Town of \_\_\_\_\_ have conducted an on-site inspection for the proposed replacement system and have determined to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Wastewater Disposal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

a. (  approve,  disapprove ) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant.

—OR—

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (  recommend  do not recommend ) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: \_\_\_\_\_

\_\_\_\_\_  
LPI'S SIGNATURE

\_\_\_\_\_  
DATE

**FOR USE BY THE DEPARTMENT ONLY**

The Department has reviewed the variance(s) and (  does  does not ) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

\_\_\_\_\_  
SIGNATURE OF THE DEPARTMENT

\_\_\_\_\_  
DATE

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207)289-3826

**PROPERTY ADDRESS**

Town Or Plantation: Augusta  
 Street/Division Lot #: Burns Road  
 PROPERTY OWNERS NAME: 22-5838  
 Last: Dubard First: Maurice  
 Applicant Name: same  
 Mailing Address of Owner/Applicant (if Different): Burns Road Augusta.

AUGUSTA CAUTION: PERMIT REQUIRED 3078 TOWN COPY  
 Date Permit Issued: 9-28-94 \$ 60.00 FEE  Double Fee Charged  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 1508

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: \_\_\_\_\_

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: 11/15/94

**PERMIT INFORMATION**

<p><b>THIS APPLICATION IS FOR:</b></p> <p>1. <input type="checkbox"/> NEW SYSTEM                  2. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM                  3. <input type="checkbox"/> EXPANDED SYSTEM                  4. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p><b>THIS APPLICATION REQUIRES:</b></p> <p>1. <input type="checkbox"/> NO RULE VARIANCE                  2. <input type="checkbox"/> NEW SYSTEM VARIANCE                  Attach New System Variance Form                  3. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM VARIANCE                  Attach Replacement System Variance Form                  a. <input checked="" type="checkbox"/> Requiring Local Plumbing Inspector Approval                  b. <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval                  4. <input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</p>	<p><b>INSTALLATION IS:</b></p> <p>COMPLETE SYSTEM</p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM                  2. <input type="checkbox"/> PRIMITIVE SYSTEM                  (Includes Alternative Toilet)                  3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)                  5. <input type="checkbox"/> HOLDING TANK _____ GAL                  6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)                  7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)                  8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)                  9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p><b>SEASONAL CONVERSION</b>                  to be completed by the LPI</p> <p>5. <input type="checkbox"/> SYSTEM COMPLIES WITH RULES                  6. <input type="checkbox"/> CONNECTED TO SANITARY SEWER                  7. <input type="checkbox"/> SYSTEM INSTALLED - P# _____                  8. <input type="checkbox"/> SYSTEM DESIGN RECORDED AND ATTACHED</p>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING                  2. <input checked="" type="checkbox"/> MODULAR OR MOBILE HOME                  3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING                  4. <input type="checkbox"/> OTHER _____                  SPECIFY _____</p>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><u>Existing Drilled</u></p>
<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED <u>20+</u></p> <p>THE FAILING SYSTEM IS:</p> <p>1. <input type="checkbox"/> BED      3. <input checked="" type="checkbox"/> TRENCH                  2. <input type="checkbox"/> CHAMBER      4. <input type="checkbox"/> OTHER: _____</p>	<p>SIZE OF PROPERTY: <u>1 Acre +/-</u>      ZONING: <u>Rural</u></p>	

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<p><b>New TREATMENT TANK</b></p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile                  2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <u>1000</u> GALS.  <u>One Piece With Pump</u></p>	<p><b>WATER CONSERVATION</b></p> <p>1. <input checked="" type="checkbox"/> NONE                  2. <input type="checkbox"/> LOW VOLUME TOILET                  3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM                  4. <input type="checkbox"/> ALTERNATIVE TOILET                  SPECIFY: _____</p>	<p><b>PUMPING</b></p> <p>1. <input type="checkbox"/> NOT REQUIRED                  2. <input type="checkbox"/> MAY BE REQUIRED                  (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)                  3. <input checked="" type="checkbox"/> REQUIRED                  DOSE: <u>75</u> GALS.</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p><u>3 Bedroom Min Size</u></p>
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <p>PROFILE: <u>8</u>      CONDITION: <u>D</u></p> <p>DEPTH TO LIMITING FACTOR: <u>8</u></p>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <p>1. <input type="checkbox"/> SMALL                  2. <input type="checkbox"/> MEDIUM                  3. <input type="checkbox"/> MEDIUM-LARGE                  4. <input checked="" type="checkbox"/> LARGE                  5. <input type="checkbox"/> EXTRA LARGE</p>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <p>1. <input checked="" type="checkbox"/> BED <u>1100</u> Sq. Ft.                  2. <input type="checkbox"/> CHAMBER _____ Sq. Ft.  <input type="checkbox"/> REGULAR <input type="checkbox"/> H-20                  3. <input type="checkbox"/> TRENCH _____ Linear Ft.                  4. <input type="checkbox"/> OTHER: _____</p>	<p>DESIGN FLOW: <u>270</u>                  (GALLONS/DAY)</p>

**SITE EVALUATOR STATEMENT**

On 9-24-94 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Site Evaluator Signature: [Signature] SE#: 241 Date: 9-25-94

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

ATTACHMENT TO FORM HHE-200  
ADDITIONAL INFORMATION ABOUT YOUR SEPTIC SYSTEM

1. YOU SHOULD HAVE YOUR SEPTIC TANK PUMPED OUT AND CHECKED EVERY TWO YEARS OR MORE OFTEN TO PROLONG THE LIFE OF YOUR SYSTEM.

2. IF YOU PLAN TO INSTALL A GARBAGE DISPOSAL IN YOUR HOME, YOU SHOULD HAVE THE NEXT AVAILABLE SIZE SEPTIC TANK INSTALLED. An alternative to this is the installation of a Zabel Industries Inc. Multi-purpose Filter, Model #A-100 or equivalent on the outlet end of the septic tank.

3. Water softeners should drain to a separate gray water disposal system.

4. Your septic tank must be installed level and all joints, inspection covers etc. must be water tight. The same is necessary for a pump tank if your system requires one.

5. The outlet invert elevation should be equal to or higher than the finish grade of the septic field to avoid flooding of the tank and solids entering the field.

6. Your system is designed to handle laundry waste water provided a separated laundry system is not indicated on Page 1 of your HHE-200 form and the total daily design flow shown on Page 1 is not exceeded. If a low water toilet is required it must use less than 1.5 gallons per flush.

7. All construction shall conform with section 11-D "State of Maine-Subsurface Wastewater Disposal Rules-Chapter 241" and all other pertinent sections.

8. All fill shall be sandy loam coarser with sufficient fines for adequate compaction.

9. Wells shall be located a minimum 100' from subsurface disposal system.

10. Property lines shown are as provided by owner and no guarantee of accuracy is implied. Actual property lines must be confirmed by survey.

11. Applicability of design must be reevaluated when location of structures are substantially different than those shown on the site plan or when other structures, additions, or appurtenances (i.e. swimming pools) are considered.

12. Systems put into service prior to establishing proper cover shall be provided with adequate erosion control to prevent damage to the system.

13. Provide low profile septic tank when determined as necessary in the field.

14. Lots not meeting the requirements if the "Minimum lot size Rule" but recorded prior to its effective date require a "Minimum Lot Size Waiver" as issued by the Department of Human Services - Division of Health Engineering.

15. Force mains, pump stations, and/or gravity piping subject to freezing shall be adequately installed.

16. The L.P.I. shall inform the owner and designer of any local ordinance exceeding the rules (Chapter 241), prior to issuing a permit, so that the application may be properly amended to conform to to such ordinances.

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

Augusta

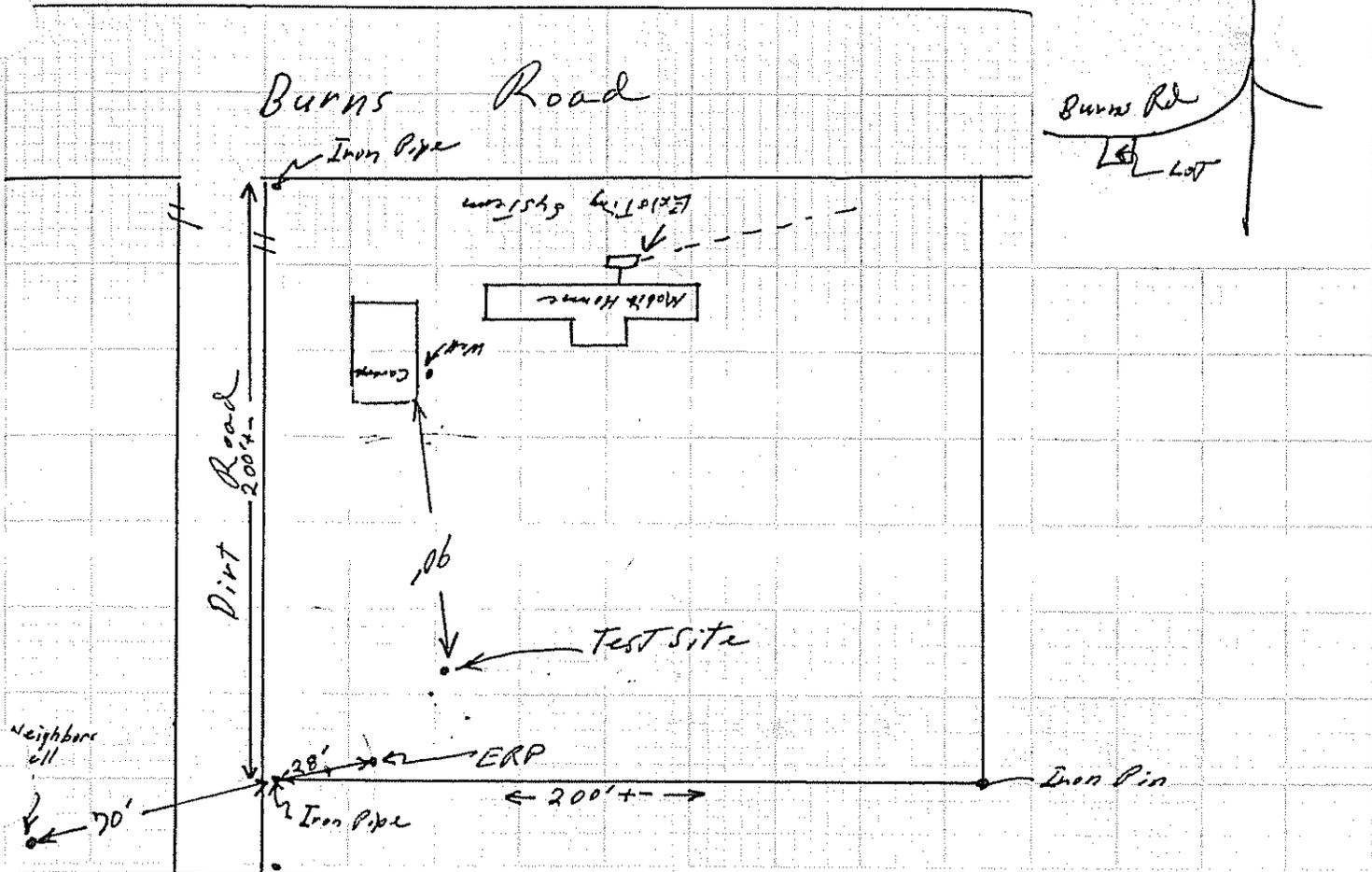
Burns Road

Mauprice Dubard

## SITE PLAN

Scale 1" = 50' FL.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



### SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole \_\_\_\_\_  Test Pit  Boring

\_\_\_\_\_ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	SLT Loam	Friable	Brown	
6			OLIVE	
10				Common
15	SLT Loam	Firm		
20				
30	SLT Loam			
40				
50				

Soil Profile: <u>8</u>	Classification Condition: <u>D</u>	Slope: <u>12%</u>	Limiting Factor: <u>8</u>	<input checked="" type="checkbox"/> Ground Water
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole \_\_\_\_\_  Test Pit  Boring

\_\_\_\_\_ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: _____	Classification Condition: _____	Slope: _____ %	Limiting Factor: _____	<input type="checkbox"/> Ground Water
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

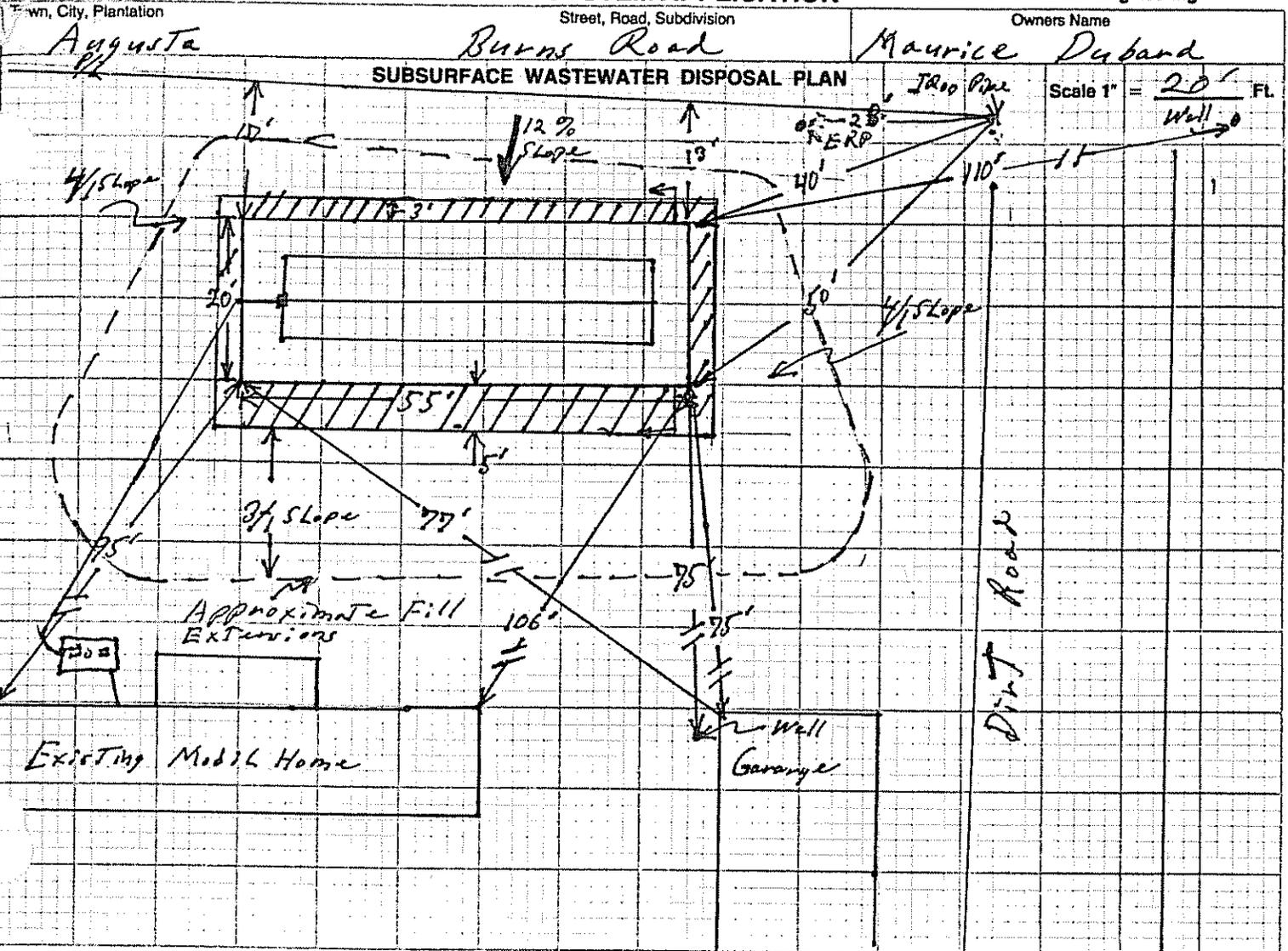
B. Dubard  
Site Evaluator Signature

241  
SE#

9-25-98  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering



**FILL REQUIREMENTS**

Depth of Fill (Upslope) 28"  
Depth of Fill (Downslope) 57"

**CONSTRUCTION ELEVATIONS**

Reference Elevation is 0"  
Bottom of Disposal Area -23"  
Top of Distribution Lines or Chambers -10"

**ELEVATION REFERENCE POINT LOCATION & DESCRIPTION**

Nail in 8" Poplar Tree Painted orange.

**DISPOSAL AREA CROSS SECTION**

See Page 4

Scale:

Vertical: 1 Inch = Ft.

Horizontal: 1 Inch = Ft.

**NOTES !**

- 1 Install One piece 1000 gallon septic tank and lift station including, pump, check valve, and alarm.
- 2 Install 2 inch pressure line, protect from freezing.
- 3 Install small distribution box.

**DISPOSAL AREA CONSTRUCTION NOTES**

- 1 Rototill disposal area and fill extensions.
- 2 place 8 inches of coarse loamy sand fill on the disposal area and fill extensions and rototill into soil.
- 3 Place remainder of fill and construct disposal area in accordance with Maine subsurface wastewater disposal rules.

CB Mc  
Site Evaluator Signature

241  
SE#

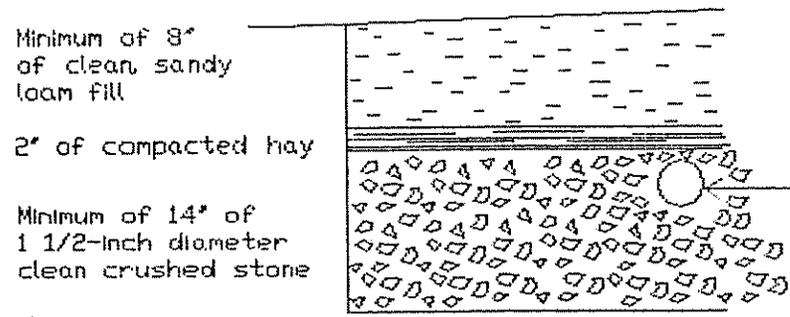
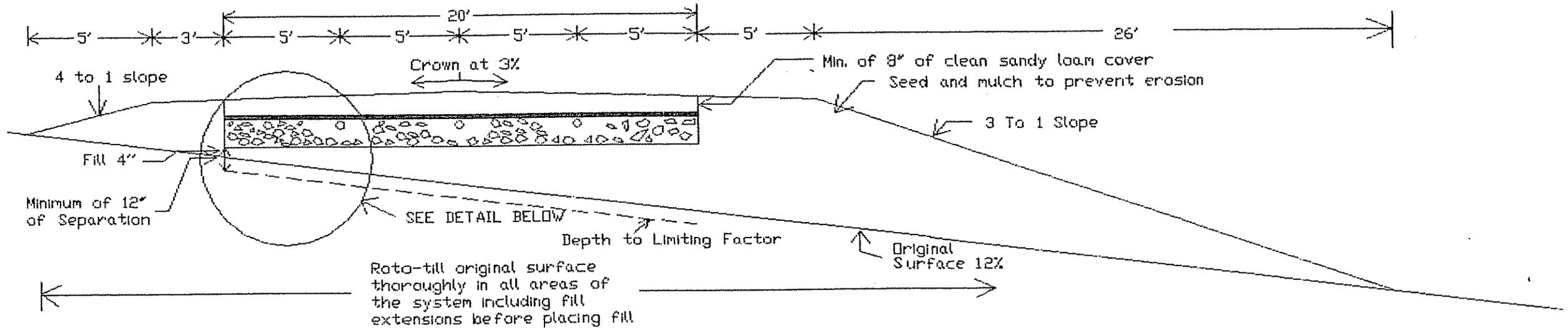
9-25-98  
Date

# ATTACHMENT TO FORM HHE-200

Maurice Dubord Burns Road Augusta Page 4 of 4

## ELEVATIONS

Reference Elevation is -0  
 Bottom of Disposal Area is -23"  
 Top of Distribution Lines is -10"



DETAIL OF BED

4-inch perforated pipe  
 NOTE: Keep 1' of stone over pipe and a minimum of 9' of stone under the pipe

Depth of Fill (Upslope) = 28"  
 Depth of Fill (Downslope) = 57"

SCALE:

Vertical: 1 inch = 5 feet  
 Horizontal: 1 inch = 5 feet

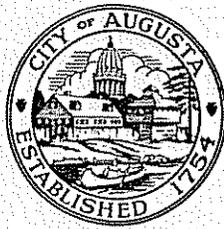
*Eugene Duke*  
 Eugene Duke SE 241

DATE: 9-25-94

# City of Augusta, Maine

## DEPARTMENT OF CITY SERVICES

Marc H. Guimont, P.E.  
Director  
(207) 626-2365



### BUREAUS:

Code Enforcement	(207) 626-2368
Engineering	(207) 626-2365
Planning	(207) 626-2366
Public Works	(207) 626-2435
Solid Waste	(207) 626-2435

May 24, 1995

Maurice Dubord  
RFD #5, Box 800  
Burns Road  
Augusta, ME 04330

Re: Burns Road  
Map #5, Lot #203  
Septic System

Dear Maurice,

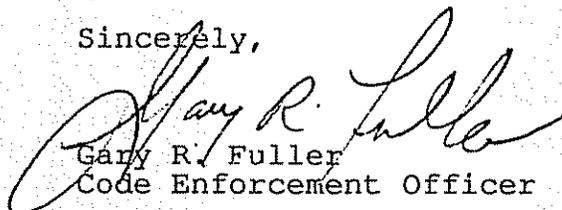
As a result of a recent inspection of the septic system installation by myself and Eugene Dube the following is a list of items which need to be completed as Eugene Dube recommended to finish the system's installation as per Mr. Dube's design plan.

1. Excavate around the perimeter of tank and seal as to insure no groundwater infiltration occurs.
2. Pump out pump tank and inspect to verify bottom of tank is sealed. (seal if needed)
3. Change pump line which exits the tank (this line needs to be level when exiting for proper operation of the check valve).
4. Install pump alarm and wire pump and alarm per code. (eliminate use of temporary extension cord)
5. Excavate along the down hill side of the bed and place additional fill to achieve the required 3 to 1 slope of the fill extension.
6. Loam entire area of bed including fill extensions and seed and mulch to provide vegetation over entire area.
7. Seal hole in pump tank where line exits to prevent excessive groundwater infiltration into tank.

Upon completion of these items I will be able to sign off on the final inspection.

Should you have any questions regarding this matter please contact me at 626-2368.

Sincerely,

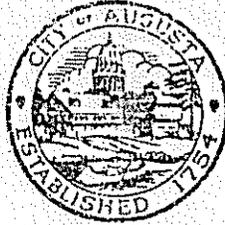
  
Gary R. Fuller  
Code Enforcement Officer

GRF/amw

# City of Augusta, Maine

DEPARTMENT OF CITY SERVICES

(207) 626-2365



**BUREAUS:**

Code Enforcement	(207) 626-2368
Engineering	(207) 626-2365
Planning	(207) 626-2366
Public Works	(207) 626-2435
Solid Waste	(207) 626-2435

August 9, 1995

Lisa Boucher  
RFD 5, Box 680  
Burns Road  
Augusta, ME 04330

Dear Lisa,

Recently I have looked at the septic system which serves your home on the Burns Road, here in Augusta. The system, which was installed in the fall of 1994, was never completed therefore a final inspection could not be done.

With the assistance of Eugene Dube a list of items which was generated in May of 1995 indicated what needed to be done to complete the installation to comply with his design to this septic system.

The contractor came back to the job site and worked on the system, supposedly completing the job.

I have recently revisited the site and found the following:

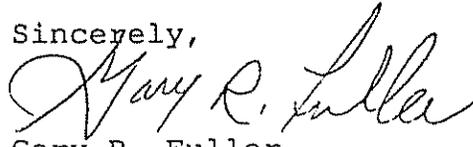
1. The fill extension was not completed as Eugene Dube intended, and septage is leaching out of the side of the fill extension.
2. The bed and fill extensions have yet to be seeded and mulched.
3. Other items which were on the list were impossible to inspect due to the fact that the contractor didn't notify me to reinspect prior to burying the system.

On August 8, 1995, I asked Eugene Dube to look at this site and the wastewater which was leaching out of the fill extensions. Mr. Dube explained that the two pine trees which are located on the downhill side of the system need to be removed and the entire area approximately twenty (20) feet in width needs to be rototilled; then a trench needs to be dug and filled with sand along the downhill side of the bed and then the fill extension be extended to meet a 4:1 slope.

Mr. Dube feels that this will correct the outbreak of sewage wastewater which exists now. Until this is corrected it is impossible to say that the system is complete.

If it was asked of me to do a final inspection, I could not. I would have to note that I didn't see part of the systems installation so I couldn't verify that all the items noted were corrected as specified.

Sincerely,



Gary R. Fuller  
Code Enforcement Officer

GRF/amw

RECEIVED *King*

AUG 30 1995



Angus S. King, Jr.  
Governor

Kevin W. Concannon  
Commissioner

STATE OF MAINE  
DEPARTMENT OF HUMAN SERVICES  
AUGUSTA, MAINE 04333

August 28, 1995

Maurice Dubard  
Box 680 Burns Road  
Augusta, ME 04330

Subject: Division on-site evaluation of recently installed and now failing waste water disposal system, Maurice Dubard property, Burns Road, Augusta

Dear Mr. Dubard:

On August 11, 1995, the Division conducted an on-site investigation into the possible causes for the failure of a recently installed waste water replacement system located now on the property of Lisa Boucher, but until more recently owned by yourself. The observed and most probable major cause(s) for the almost immediate failure of the system was:

\* The improper preparation of the bed disposal area site, i.e. the disposal area location designated by Eugene Dube, SE in his design does not appear to have been adequately prepared by the system's contractor. Note: see the site evaluator's *DISPOSAL AREA CONSTRUCTION NOTES* found on page 3 of 3 of his design (enclosed) for specific construction details. These construction requirements were (and are) very important to the proper long term functioning of the system.

\* The combination septic tank/pump station unit *installation* was observed to have been installed using very poor workmanship standards. Specifically, the force main from the septic tank to the disposal bed area showed with a saturated soil condition indicating a leakage and/or breakage in the line plus the septic tank outlet was not properly sealed nor was the outlet at the correct elevation (vertical outlet pipe height). The tank's outlet appeared to have been re-cut at an incorrect (lower) pipe invert and improperly sealed because it was again leaking effluent at the tank outlet.

\* Overall, the entire system's installation would be rated as substandard and does not minimally meet the designer's system installation specifications.

Mr. Dubard  
Page 2  
August 28, 1995

Should you or others have any questions regarding this assessment,  
please either write or call:

Division of Health Engineering  
State House Station 10  
Augusta, ME 04333  
207-287-5688

Sincerely,



Jay Hardcastle

JH/cas

cc: Gary Fuller, LPI, Augusta  
Eugene Dube, SE  
Lisa Boucher, current property owner  
RFD 5 Box 680  
Augusta, ME 04330